SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA ATE CORPORATION COMMISSION		IIA	213532278 DN	
1.) CORPORATION NAME:			DUE DATE: 6	/30/2013	
Prostorion Incurones Company			DOL DATE.	100/2010	
Praetorian Insurance Company 2.) VA REGISTERED AGENT NAMI CT CORPORATION SYSTEM	AND OFFICE ADDRESS:		SCC ID NO: F	SCC ID NO: F0410631	
4701 COX RD STE 301			5.) STOCK IN	FORMATION	
GLEN ALLEN, VA			CLASS	AUTHORIZED	
3.) CITY OR COUNTY OF VA REGI HENRICO COUNTY	STERED OFFICE:		COMMON	100,000	
4.) STATE OR COUNTRY OF INCO	RPORATION:				
6.) PRINCIPAL OFFICE ADDRESS:					
ADDRESS: WALL S 88 PINE	TREET PLAZA STREET				
CITY/ST/ZIP: NEW \	ORK, NY 10005				
7.) DIRECTORS AND PRINCIPAL C	<u> </u>	d princ	inal officers must be	listed. An individual	
	may be designated	ated as	both a director and	an officer.	
		Х	FFICER	χ DIRECTOR	
NAME:	David Duclos				
TITLE:	President/CEO				
ADDRESS:	Wall Street Plaza				
CITY/ST/ZIP/CO:	88 Pine Street NEW YORK, NY 10005				
		Х	DFFICER	DIRECTOR	
NAME:	JODIE L BURTNETT				
TITLE: ADDRESS:	ASST SECRETARY				
CITY/ST/ZIP/CO:	ONE GENERAL DRIVE SUN PRAIRIE, WI 53596				
	0011 17, II(IL), W1 00000		DFFICER	DIRECTOR	
NAME:	PETER MALONEY	X	FFICER	DIRECTOR	
TITLE:	SECRETARY				
ADDRESS:	Wall Street Plaza				
	88 Pine Street				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
			OFFICER	X DIRECTOR	
NAME:	HARVEY BAZAAR				
TITLE: ADDRESS:	DIRECTOR				
ADDRESS.	Wall Street Plaza 88 Pine Street				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
			OFFICER	X DIRECTOR	
NAME: TITLE:	CHRISTOPHER DAVIES				
ADDRESS:	DIRECTOR 210 INTERSTATE N PARKWAY,				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	SUITE 400				
CITY/ST/ZIP/CO:	ATLANTA, GA 30339				
			DFFICER	X DIRECTOR	
NAME:	GREGORY DEAL				
TITLE: ADDRESS:	DIRECTOR 7333 SUNWOOD DRIVE				
CITY/ST/ZIP/CO:	RAMSEY, MN 55303				

		OFFICER	χ DIRECTOR		
NAME:	ROD FARRELL				
TITLE:	DIRECTOR				
ADDRESS:	Wall Street Plaza				
ADDITEGO.					
CITY/ST/ZIP/CO:	88 Pine Street				
G11 1/61/211 /66.	NEW YORK, NY 10005				
		OFFICER	χ DIRECTOR		
NAME:	MARC METCALF				
TITLE:	DIRECTOR				
ADDRESS:	Wall Street Plaza				
ABBRESS.	88 Pine Street				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
511 1/6 1/ <u>2</u> 11 / 661	NEW TORR, NT 10005				
		OFFICER	χ DIRECTOR		
NAME:	JOHN NEAL				
TITLE:	DIRECTOR				
ADDRESS:	Wall Street Plaza				
	88 Pine Street				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
	,	OFFICER	DIDECTOR		
		OFFICER	X DIRECTOR		
NAME:	ANTHONY PRZYBYSZEWSKI				
TITLE:	DIRECTOR				
ADDRESS:	Wall Street Plaza				
	88 Pine Street				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
		OFFICER	χ DIRECTOR		
NAME:	MUCE COALA	U OFFICER	A BIRESTOR		
	MIKE SCALA				
TITLE:	DIRECTOR				
ADDRESS:	Wall Street Plaza				
0171/107/710/00	88 Pine Street				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
		OFFICER	χ DIRECTOR		
NAME:	Susan Harnett				
TITLE:	DIRECTOR				
ADDRESS:	Wall Street Plaza				
ADDITEGO.	88 Pine Street				
CITY/ST/ZIP/CO:	New York, NY 10005				
G11 1/G1/211 / GG1	14CW 16IK, 141 16665				
		OFFICER	χ DIRECTOR		
NAME:	John Langione				
TITLE:	DIRECTOR				
ADDRESS:	Wall Street Plaza				
	88 Pine Street				
CITY/ST/ZIP/CO:	New York, NY 10005				
		X OFFICER	DIRECTOR		
NARAT		X OFFICER	DIRECTOR		
NAME:	Joanna Colaneri				
TITLE:	TREASURER				
ADDRESS:	Wall Street Plaza				
OLT VIOT ZUDIOO	88 Pine Street				
CITY/ST/ZIP/CO:	New York, NY 10005				
I AFFIRM THAT THE INFORMATION	N CONTAINED IN THIS ELEC	TRONIC REPORT IS A	CCURATE AND		
COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ JODIE L BURTNETT	JODIE L BURTNETT, ASS		7/11/2013		
SIGNATURE OF DIRECTOR/OFFICER		DODATE	DATE		
LISTED IN THIS REPORT PRINTED NAME AND CORPORATE TITLE					
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material					
respect with the intent that the document be delivered to the Commission for filing.					